1383511



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, DC 20549

FORM D





Filing Under (Check box(es) that ap	pply):	[] Rule 504	[] <u>Rule 505</u>	(X) Rule 506	[] Section 4(6)	[]ULO
Type of Filing: [x] New Filing []	Amendme	nt		,	PROC	ESSE
	A.	BASIC IDEN	TIFICATION DA	ATA	DEC 1	8 2006
1. Enter the information requested	about the is	suer	······································		THOM	SON
Name of Issuer ([] check if this is Terreco Properties LLC	an amendn	nent and name has	changed, and ind	icate change.)	HAVON	OIAL
Address of Executive Offices (Num Post Office Box 779, Wilmi			• •	lephone Numb 10) 616-669	er (Including Area C	ode)
Address of Principal Business Oper (if different from Executive Offices)	rations (No	umber and Street,	City, State, Zip Co	de) Telephon	e Number (Including	Area Code
Brief Description of Business Commercial real estate-rel	ated					,
Commercial feat estate-rei	·					
Type of Business Organization			السينين والسينية	[X] ot	ther (please specify):	
	[] lim	ited partnership, a	iready formed			
Type of Business Organization		ited partnership, a ited partnership, to	- 1	Limited	d Liability Com	any
Type of Business Organization] corporation			- 1		d Liability Com	oany

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership Each general and managing partner of partnership issuers. [] Executive Officer [] Director [] General and/or Check Box(es) that Apply: [X] Promoter [X] Beneficial Owner Full Name (Last name first, if individual) DuBose, Warren S. - Managing Member of Wood Hill Group, LLC, Managing Member of Terreco Properties LLC Business or Residence Address (Number and Street, City, State, Zip Code) Post Office Box 779, Wilmington, NC 28480 Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner Full Name (Last name first, if individual) Clark, G. Douglas - Managing Member of Alligator Properties LLC, Managing Member of Terreco Properties LLC Business or Residence Address (Number and Street, City, State, Zip Code) 29 Greensboro Street, Wrightsville Beach, NC 28403 [] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Chai, Peter Business or Residence Address (Number and Street, City, State, Zip Code) 4 Stephanie Lane, Croton-on-Hudson, NY 10520 Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Check Box(es) that Apply: **Managing Partner** Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

•				B. II	NFORM!	ATION A	BOUT C	FFERIN	IG			
1. Has t	the issuer	sold, or d	oes the is	suer inten	d to sell, to	non-acca	edited inve	stors in this	s offering?.		•	Yes !
	1			Answer	also in Ap	pendix, Co	lumn 2, if t	filing under	ULOE.			. , ,
2. What	is the mi	nimum inv	estment t					-	1			\$50,0
3. Does the offering permit joint ownership of a single unit?											Yes	
									i i			[X]
commis person t states, I	sion or si to be liste list the na	milar remu d is an as me of the	ineration 1 sociated p broker or	for solicitation person or a dealer. If i	tion of pure agent of a l more than	chasers in broker or d five (5) per	connection lealer regis	with sales itered with listed are	directly or of securities of securities the SEC ar associated	es in the off ad/or with a	ering. If a state or	9
ull Nar V/A	me (Last i	name first,	if individu	ıai)			······································					
Busines	s or Resi	dence Ad	dress (Nur	nber and	Street, City	, State, Zi	p Code)		<u> </u>			
Name o	of Associa	ted Broke	r or Deale	r						•		
States i	n Which F	Person Lis	ted Has S	olicited or	Intends to	Solicit Pu	rchasers		 			
Check "	'All States	or check	individual :	States)		•					1] All States
AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
L)	[N]	[A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[Mi]	[MN] .	[MS]	[MO]
MTJ	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
RI]	[SC]	[SD]	[TN]	[TX]	ָנדטן	[[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
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Busines	s or Resi	dence Add	dress (Nur	mber and	Street, City	y, State, Zi	p Code)	1				
lame o	f Associa	ted Broke	r or Deale	r							•	
			ted Has S individual :		Intends to	Solicit Pu	rchasers		,		f] All States
AL] ^u	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
iL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
MT] RI]	(NE) (SC)	[NV] [SD]	(NH) (TN)	[NJ] [TX]	[NM] [UT]	[VY] [VT]	[NC] [VA]	(ND) [WA]	[WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
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,,		dence Ad	dress (Nur	mber and	Street, City	y, State, Zi	p Code)				<u>.</u>	
WÄ.	s or Resi	delice Au										- 1
V/A Busines			r or Deale	r								
N/A Susines Same o	f Associa	ted Broke Person Lis		olicited or	Intends to	Solicit Pu	rchasers				÷	7 All Cana-
N/A Busines Name o States in Check	of Associa n Which F	ted Broke Person Lis	ted Has S individual :	olicited or States)	••••••						j	-
N/A Busines Name o States ii (Check "	of Associa on Which F 'All States [AK]	ted Broke Person Lis or check	ted Has S individual : [AR]	olicited or States) [CA]	[CO]	[СТ]	(DE)	[DC]	[FL]	[GA]	(HI)] All State
N/A Busines Name o	of Associa n Which F	ted Broke Person Lis	ted Has S individual :	olicited or States)	••••••			[DC] [MA] [ND]	(FL) [MI] [OH]	[GA] [MN] [OK]	•	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction				
is an exchange offering, check this box \square and indicate in the columns below the	•			
amounts of the securities offered for exchange and already exchanged.				
		Aggregate	Amo	ount Already
Type of Security		Offering Price	• •	Sold
Debt		<u>}</u>	\$ <u>0</u> \$ <u>0</u>	
Equity	2 <u>0</u>	<u> </u>	\$_0	
[] Common [] Preferred		ĺ		
Convertible Securities (including warrants)				
Partnership Interests			\$ <u>0</u>	
Other (Specify: Limited Liability Company Membership Interests)				0.000
Total	\$ <u>3.0</u>	00.000	\$ <u>2.60</u>	00.000
Answer also in Appendix, Column 3, if filing under ULOE.	- 1			
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under <u>Rule 504</u> , indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	.			
	ĺ		Aggre	gate
•				Amount
·		er investors		chases
Accredited Investors				00,000
Non-accredited Investors	0		\$ <u>Q</u>	
Answer also in Appendix, Column 4, if filing under ULOE.	N/A		\$ <u>N/A</u>	
requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
	1		· .	
Type of offering	Type	of Security	Sold	Amount
Rule 505	N/A		\$	N/A
			*	N/A
Regulation A	N/A		*	N/A
Total			*	N/A
1000	100		Ψ	IVA
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	,			
Transfer Agent's Fees			f i e	
Printing and Engraving Costs				
Legal Fees		1		
Accounting Fees				
Engineering Fees				
Sales Commissions (specify finders' fees separately)				
Other Expenses (identify)				
Total	••••••	*	[] 4_ 2(Y)	20.00
		***************************************	[74] 4 _	20.00
b. Enter the difference between the aggregate offering price given in response to Part C - Question 4.a. This difference is the "adjissuer."	usted g	gross proceeds to the		2,580,00

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

		Payments to Officers, Directors, & Payments To Affiliates Others	
	alaries and fees		_
P	rurchase of real estate !	[]\$[]\$	_
ε	rurchase, rental or leasing and installation of machinery and equipment	[]\$[]\$	
C	onstruction or leasing of plant buildings and facilities	[]\$[]\$	
s e p	equisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer oursuant to a merger)	[]\${}	_
R	lepayment of indebtedness	[]\$ {]\$	_
W	Vorking capital	[]\$ [X]\$ <u>2,580,000</u>	_
0	Other (specify):		
	Column Totals		_
To	otal Payments Listed (column totals added)	[X] \$ <u>2.580.000</u>	
		•	

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature Date				
Terreco Properties LLC	For bood 1/1 Graphic 11/27/06				
Name of Signer (Print or Type)	Title of Signer (Print or Type)				
Wood Hill Group, LLC, by Warren S. DuBose	Managing Member of Wood Hill Group, LLC, Managing Member of Terreco Properties LLC				

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

issuer (Print or Type)

Terreco Properties LLC

Name of Signer (Print or Type)

Wood Hill Group, LLC, by Warren S. DuBose

11/27/06

Title of Signer (Print or Type)

Managing Member of Wood Hill Group

LLC, Managing Member of Terreco Properties LLC

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.